## PART B - FEE(S) TRANSMITTAL

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•	0,	3 2007		P.O. Box 1450 Alexandria, Virg (571)-273-2885		450	
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10/03/2007	INTEFS₩ 00008035		Ogn	yan I. Ber	remski	(Depositor's name) (Signature)	
01 FC:1501 1440.00 DA 02 FC:1504 300.00 DA				Total	10	-3-07	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	ror ,	ATTORNEY DO	OCKET NO. CO	NFIRMATION NO.
10/675,110 . TITLE OF INVENTION: N	.09/30/2003 MEDIA PROCESSING	SYSTEM SUPPORTIN	Marcus Kellerman	· .	14972U ERVER-BASED		4986 }
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOTAL	L FEE(S) DUE	DATE DUE
nonprovisional	NO	\$\$25\$1440	\$300	. \$0		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	10/03/2007
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS			•	
REVAK, CHRISTOPHER A 2131			726-026000	<del>-</del>			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  McAndrews, Held  & Malkoy, Ltd.				
B. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i  (A) NAME OF ASSIGN	s an assignee is identif n 37 CFR 3.11. Compl IEE		data will appear on the Ta substitute for filing (B) RESIDENCE: (C)	ne patent. If an assign an assignment. TTY and STATE OR (	COUNTRY)	below, the docum	ent has been filed for
	orporation			c, California			
4a. The following fee(s) are  Issue Fee  Publication Fee (No	submitted:	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-1017 (enclose an extra copy of this form).					
5. Change in Entity Status  a. Applicant claims S	SMALL ENTITY status	s. See 37 CFR 1.27.	• • • • • • • • • • • • • • • • • • • •	longer claiming SMA			
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Authorized Signature	- Opley	Klyw		Date	10-3	-07	
Typed or printed name	Ognyan 1.	Beremski	Y	Registration 1	No. <u>51,4</u>	58	·
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313 Under the Paperwork Redu	-1450.						